



- MUST USE MOST **CURRENT** FORM
- **PRINT** CLEARLY IN BLACK INK
- MAKE SURE ENTIRE CIRCLE IS **FILLED**

EXAMPLE:

Yes



No



APPLICATION FOR CERTIFICATION OF IGNITION INTERLOCK VENDOR

PAYMENT INFORMATION

NOTE: Application will not be processed without the required \$450.00 fee. Please include payment and proof of liability insurance with this application.

Type of Application: ☐ Original ☐ Re-Inspection

↑ THE ABOVE SPACE IS RESERVED FOR OFFICE USE ONLY ↓

PART I. VENDOR'S SERVICE CENTER INFORMATION

Service Center

Name(as it appears on business license):

Service Center

Physical Address (No PO Box):

City: State (2- Letter Code): ZIP: Local Phone Number:

Toll – Free Phone Number: Email Address:

Web Address (if applicable):

Service Center Mailing

Address (if different from physical address):

City: State (2- Letter Code): ZIP:

Printed First Name of Business Manager: Printed Last Name of Business Manager:

Business Manager Phone Number: Business Manager Email:

Printed First Name of Business Owner: Printed Last Name of Business Owner:

Business Owner Phone Number: Business Owner Email:

PART II. MANUFACTURERS' DEVICES SERVICED (SELECT ALL THAT APPLY)

- ☐ A & A Product Company - FIT228 LC
- ☐ Alcohol Detection Systems - DM 904 and/or DM 909
- ☐ Alcolock - WR2 and/or LR
- ☐ America's Alcohol Testing Inc. - Freedom 5 Interlock
- ☐ B.E.S.T. Labs Inc. - FR 9000
- ☐ Blow And Drive Interlock - BDI 747
- ☐ Clean Start Systems - CSS APIID 700
- ☐ Drager - XT and/or 3530920 and/or Interlock 7000
- ☐ Guardian – 3060 and/or AMS 2000
- ☐ Instant Interlock – Bracaudit Lock I
- ☐ Intoxalock – 1001A
- ☐ Lifesafer – FC100
- ☐ Low Cost Interlock – LCI 750
- ☐ Monitech Ignition Interlock Systems – QT 1L
- ☐ Simple Interlock – Co Pilot
- ☐ Skyfine – AT588
- ☐ Smart Start Inc. – SSI1000 and/or SSI 20/20 and/or SSI 20/30
- ☐ Other (SPECIFY MANUFACTURE AND DEVICE): _____

- Continued on page 2

| III. SERVICES PROVIDED (SELECT ALL THAT APPLY) | | |
|--|---|--|
| <input type="radio"/> Device Installation | <input type="radio"/> Fixed Location <input type="radio"/> Mobile | If offering mobile services, provide the number of mobile units_____ |
| <input type="radio"/> Device Monitoring | <input type="radio"/> Fixed Location <input type="radio"/> Mobile | If offering mobile services, provide the number of mobile units_____ |
| <input type="radio"/> Device Maintenance | <input type="radio"/> Fixed Location <input type="radio"/> Mobile | If offering mobile services, provide the number of mobile units_____ |
| <input type="radio"/> Device Removal | <input type="radio"/> Fixed Location <input type="radio"/> Mobile | If offering mobile services, provide the number of mobile units_____ |

| PART IV. AGREEMENT AND AFFIRMATION | |
|--|--|
| <p>I verify the information provided is true and correct, and I understand any required fee is non-refundable. I also understand this is an official government record and any missing information and/or false statement made on this document or any other supplement provided to DPS may result in criminal prosecution. Signature of the applicant or authorized individual further grants the director or his designee, the right to enter and to inspect the premises or any records required to be kept by Texas Law and Department rule. Furthermore, I understand I must install, sell, service, and or monitor Ignition Interlock Devices approved by the Texas Department of Public Safety and adhere to manufacture's specifications.</p> <div> <div> Manager Signature_____ Date_____ </div> <div> Owner Signature (if different from Manager)_____ Date_____ </div> </div> | |

This form and attachments can be forwarded by mail to:

Texas Department of Public Safety
Ignition Interlock Device
P.O. Box 15999
Austin, Texas 78761-5999

Privacy Policy Sec. 559.003. RIGHT TO NOTICE ABOUT CERTAIN INFORMATION LAWS AND PRACTICES (a) Each state governmental body that collects information about an individual by means of a form that the individual completes and files with the governmental body in a paper format or in an electronic format on an Internet site shall prominently state, on the paper form and prominently post on the Internet site in connection with the electronic form, that: (1) with few exceptions, the individual is entitled on request to be informed about the information that the state governmental body collects about the individual; (2) under Sections 552.021 and 552.023 of the Government Code, the individual is entitled to receive and review the information; and (3) under Section 559.004 of the Government Code, the individual is entitled to have the state governmental body correct information about the individual that is incorrect. (b) Each state governmental body that collects information about an individual by means of an Internet site or that collects information about the computer network location or identity of a user of the Internet site shall prominently post on the Internet site what information is being collected through the site about the individual or about the computer network location or identity of a user of the site, including what information is being collected